Case 15-30290-btf7 Doc 1 Filed 06/04/15 Entered 06/04/15 09:14:23 Desc Main _{6/04/15 9:09AM} Document Page 1 of 49

B1 (Official Form 1)(04/13)	Docu	шеп	Γαί	Je I OI	43			
	States Bankru stern District of I						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Middle): Hardwick, Jacob Marcus					ebtor (Spouse Regina Mai) (Last, First, rie	Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names):	3 years					oint Debtor in trade names):	n the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-1896		ete EIN	(if more	than one, state x-xx-6546	all)		axpayer I.D. (ITIN) N	No./Complete EIN
Street Address of Debtor (No. and Street, City, a 111 Wison St. Wheaton, MO	,	ZIP Code	111	Address of Wison S eaton, M	St.	(No. and Stre	eet, City, and State):	ZIP Code
County of Residence or of the Principal Place of Barry		874	County Bai	•	nce or of the	Principal Pla	ce of Business:	64874
Mailing Address of Debtor (if different from street P.O. Box 261 Wheaton, MO		ZID Codo	P.0	g Address . Box 26 eaton, M	1	or (if differen	t from street address)	
		ZIP Code 874						ZIP Code 64874
Location of Principal Assets of Business Debtor (if different from street address above):								
Type of Debtor (Form of Organization) (Check one box)	Nature of I (Check on				•	-	tcy Code Under Whed (Check one box)	ich
■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Health Care Busin ☐ Single Asset Real in 11 U.S.C. § 101 ☐ Railroad ☐ Stockbroker ☐ Commodity Broke ☐ Clearing Bank ☐ Other	ess Estate as def I (51B)	fined	Chapte Chapte Chapte Chapte Chapte	er 7 er 9 er 11 er 12	☐ Ch of a	apter 15 Petition for la Foreign Main Proce a Foreign Main Proce apter 15 Petition for la a Foreign Nonmain P	eding Recognition
Chapter 15 Debtors Country of debtor's center of main interests:	Tax-Exemp	ot Entity		_		(Check	of Debts one box)	
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box, if Debtor is a tax-exem under Title 26 of the Code (the Internal Re	pt organization United States		defined "incurr	•		busin	s are primarily ness debts.
☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must care the being described for the court's consideration. See Official Form 3P.			or is a snor is not or's aggress than specificable on is being a snor is being or is a snor is being or is a snor is	egate nonco 62,490,925 (as boxes: ag filed with	debtor as definess debtor as debtor as debtor as dentingent liquida amount subject this petition.	nted debts (excl to adjustment o		ee years thereafter).
		in ac	cordance	with 11 U.S	.C. § 1126(b).			
Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distributi	erty is excluded and add	ministrative		es paid,		THIS	SPACE IS FOR COURT	USE ONLY
1- 50- 100- 200-		0,001- 25,	,001- ,000	50,001- 100,000	OVER 100,000			
Estimated Assets Stop	\$1,000,001 \$10,000,001 \$2 to \$10 to \$50 to	50,000,001 \$10 \$100 to \$	00,000,001 6500 lion					
\$0 to \$50,001 to \$100,001 to \$500,001		50,000,001 \$10	00,000,001	\$500,000,001 to \$1 billion	More than \$1 billion			

Voluntary Petition		Name of Debtor(s): Hardwick, Jacob Marcus			
(This page mus	et be completed and filed in every case)	Hardwick, Regina Marie			
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad	ditional sheet)		
Location Where Filed:	- None -	Case Number:	Date Filed:		
Location Where Filed:		Case Number:	Date Filed:		
Per	ding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debto - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		hibit B whose debts are primarily consumer debts.)		
forms 10K ar pursuant to S	eted if debtor is required to file periodic reports (e.g., ad 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	I, the attorney for the petitioner named have informed the petitioner that [he o 12, or 13 of title 11, United States Cod	in the foregoing petition, declare that I r she] may proceed under chapter 7, 11, i.e., and have explained the relief available fy that I delivered to the debtor the notice		
☐ Exhibit A	A is attached and made a part of this petition.	X /s/ Sam M. Coring	June 4, 2015		
		Signature of Attorney for Debtor(s) Sam M. Coring	(Date)		
	Exh	libit C			
☐ Yes, and I ☐ No. (To be comple ☐ Exhibit I If this is a join	eted by every individual debtor. If a joint petition is filed, ead completed and signed by the debtor is attached and made	libit D ch spouse must complete and attach a a part of this petition.			
	Information Regardin	g the Debtor - Venue			
_	(Check any ap Debtor has been domiciled or has had a residence, principal	•	s in this District for 180		
-	days immediately preceding the date of this petition or for				
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnership pending	in this District.		
	Certification by a Debtor Who Reside (Check all app		ty		
Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)					
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the antire monetary default that gave rise to the judgment				
	the entire monetary default that gave rise to the judgment in Debtor has included with this petition the deposit with the after the filing of the petition.				
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(l)).			

Name of Debtor(s):

B1 (Official Form 1)(04/13)

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Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Hardwick, Jacob Marcus Hardwick, Regina Marie

Signatures Signature of a Fourign Ponnegon

Signature(s) of Debtor(s) (Individual/Joint)I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

and read the notice required by 11 0.5.c. §542(0).

X /s/ Jacob Marcus Hardwick

Signature of Debtor Jacob Marcus Hardwick

X /s/ Regina Marie Hardwick

Signature of Joint Debtor Regina Marie Hardwick

Telephone Number (If not represented by attorney)

June 4, 2015

Date

Signature of Attorney*

X /s/ Sam M. Coring

Signature of Attorney for Debtor(s)

Sam M. Coring 46882

Printed Name of Attorney for Debtor(s)

Reynolds, Gold & Grosser, P.C.

Firm Name

1240 East Independence Suite 200

Springfield, MO 65804

Address

Email: jenniferi@rgglaw.net

417-864-4700 Fax: 417-864-4774

Telephone Number

June 4, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

$Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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United States Bankruptcy Court Western District of Missouri

In	Jacob Marcus Hardwick 1 re Regina Marie Hardwick		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSA	TION OF ATTO	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	ne petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received			1,000.00
	Balance Due		\$	0.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation	on with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of			
6.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspec	ts of the bankruptcy c	ase, including:
	a. [Other provisions as needed]			
7.	By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any discharge			y proceeding.
	CE	RTIFICATION		
thi	I certify that the foregoing is a complete statement of any agree is bankruptcy proceeding.	ement or arrangement for	r payment to me for re	epresentation of the debtor(s) in
Da	ated: June 4, 2015	/s/ Sam M. Corin	g	
		Sam M. Coring Reynolds, Gold 8		_
		1240 East Indepe Suite 200	endence	
		Springfield, MO		
		417-864-4700 Fa jenniferi@rgglaw		

Alltel Communications Building 4, Fifth Floor One Allied Drive Little Rock AR 72202-2099

Bank of America Home Loans P.O. Box 5170 Simi Valley CA 93062-5170

Barry-Lawrence Ambulance P.O. Box 384 Monett MO 65708

Berlin-Wheeler, Inc. P.O. Box 463 Jefferson City MO 65102-0463

Cox Medical Centers 1423 N. Jefferson Ave. Springfield MO 65802-1917

Cox Monett Hospital 801 N. Lincoln Ave Monett MO 65708-1641

Cox Regional Services 3555 S. National Ave. Suite 400 Springfield MO 65807

CoxHealth 1423 N. Jefferson Ave. Springfield MO 65802-1917

Credit Collection Services Two Wells Avenue Newton Center MA 02459

DirecTV P.O. Box 9001069 Louisville KY 40290-1069 Dr. Stephen Stidham, DDS c/o Kansas Counselors of KS P.O. Box 14765 Lenexa KS 66285

Ferrell-Duncan Clinic, Inc. P.O. Box 9007 Springfield MO 65808-9007

Freeman Anesthesia c/o Transworld Systems, Inc. 507 Prudential Rd. Horsham PA 19044

Freeman Health System 1102 West 32nd St. Springfield MO 65804

Independent Imaging, LLC P.O. Box 1297 Joplin MO 64802-1297

Jason W. Bolton, Esq. 300 S. John Q. Hammons Pkwy. Suite 112
Springfield MO 65806

Litton & Giddings Rad. Assoc., P.C. P.O. Box 2727 Springfield MO 65801-2727

Mark Hardwick Purdy MO

Matthew G. Adrian, Esq. P.O. Box 939
Joplin MO 64802-0939

Mercy Clinic 1730 E. Portland Springfield MO 65804 Mercy Hospital 1730 E. Portland Springfield MO 65804

Navient Solutions, Inc. P.O. Box 9500 Wilkes Barre PA 18773-9500

Progressive Insurance Co. 6300 Wilson Mills Rd. Cleveland OH 44143

Rickman & Rickman P.O. Box 212269 Columbia SC 29221

SW Kansas Emergency Physicians, LLP 75 Remittance Drive Suite 1151 Chicago IL 60675-1151

Transworld Systems, Inc. 507 Prudential Rd. Horsham PA 19044

US Bank 832 US Highway 60 Monett MO 65708

Valarity, LLC P.O. Box 505023 Saint Louis MO 63150-5023

Verizon Wireless Attn: Recovery Department 1515 E. Woodfield Rd. Suite 1400 Schaumburg IL 60173-5443

West Asset Management 2703 N. Highway 75 Sherman TX 75090

Western Plains Medical c/o Medicredit, Inc. P.O. Box 1629 Maryland Heights MO 63043 Case 15-30290-btf7 Doc 1 Filed 06/04/15 Entered 06/04/15 09:14:23 Desc Main Document Page 9 of 49

United States Bankruptcy Court Western District of Missouri

In re	Regina Marie Hardwick		Case No.	
	-	Debtor(s)	Chapter	7

VERIFICATION OF MAILING MATRIX

The above-named Debtor(s) hereby verifies that the attached list of creditors is true and correct to the best of my knowledge and includes the name and address of my ex-spouse (if any).

Date:	June 4, 2015	/s/ Jacob Marcus Hardwick	
		Jacob Marcus Hardwick	
		Signature of Debtor	
Date:	June 4, 2015	/s/ Regina Marie Hardwick	
		Regina Marie Hardwick	
		Signature of Debtor	

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Western District of Missouri

In re	Jacob Marcus Hardwick,		Case No.	
	Regina Marie Hardwick			
_		Debtors	Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	31,000.00		
B - Personal Property	Yes	4	32,418.48		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		29,963.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		26,300.21	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,429.44
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,395.00
Total Number of Sheets of ALL Schedu	ıles	22			
	T	otal Assets	63,418.48		
			Total Liabilities	56,263.21	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Western District of Missouri

In re	Jacob Marcus Hardwick,		Case No.	
	Regina Marie Hardwick			
		Debtors	Chapter_	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	1,075.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	1,075.00

State the following:

Average Income (from Schedule I, Line 12)	3,429.44
Average Expenses (from Schedule J, Line 22)	3,395.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,692.77

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		26,300.21
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		26,300.21

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B6A (Official Form 6A) (12/07)

In re	Jacob Marcus Hardwick,	Case No.
	Regina Marie Hardwick	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

House and 1 1/2 Lots Location: 111 Wison St., Wheaton MO 64874	Primary Residence	J	31,000.00	29,963.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 31,000.00 (Total of this page)

31,000.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Jacob Marcus Hardwick,	Case No.
	Regina Marie Hardwick	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on Hand	J	50.00
2.	Checking, savings or other financial accounts, certificates of deposit, or	Checking Account #xx7121 Security Bank of Southwest Missouri	J	0.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	Joint Account with Naomi Daniels		
	unions, brokerage houses, or cooperatives.	Checking Account #xx1714 Security Bank of Southwest Missouri	Н	0.00
3.	Security deposits with public utilities, telephone companies,	Utility Deposit Barry County Electric Co-op	J	100.00
	landlords, and others.	Utility Deposity City of Wheaton Utilities	J	100.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	Sectional Couch, Loveseat, Piano, Entertainment Center, Armoire, Children's Toys, 3 Televisions, 2 DVD Players, Dining Room Table and 5 Chairs, Pots and Pans, Dishware, Coffee Pot, Mixer, Toaster, Stove, Microwave, Refrigerator, Washer, Dryer, Bedroom Set, Tools, Toolbox, Miscellaneous Scrap Material, BBQ Grill, Weedeater, Push Spreader, Lawn Mower, Chainsaw, Tablesaw		2,900.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Books, DVD's, Knife Collection	J	300.00
6.	Wearing apparel.	Clothing	J	300.00
7.	Furs and jewelry.	Wedding Ring	н	100.00
		Miscellaneous Costume Jewelry	w	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	Fishing Poles, Pilates Machine	J	100.00

Sub-Total > 4,000.00
(Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Jacob Marcus Hardwick
	Regina Marie Hardwick

|--|

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing	401 Wel	(k) is Fargo	н	8,753.48
	plans. Give particulars.	ESC Sch	P rieber Foods, Inc.	н	17,665.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
				Sub-Tot Total of this page)	al > 26,418.48

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Jacob Marcus Hardwick
	Regina Marie Hardwick

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Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		Pontiac G6 1G2ZF55B164211176	Н	2,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	Dog		J	0.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
			(T	Sub-Tota of this page)	al > 2,000.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

0.00 Sub-Total > (Total of this page) Total > 32,418.48

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B6C (Official Form 6C) (4/13)

Jacob Marcus Hardwick, In re Regina Marie Hardwick

Case No.		

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT							
Debtor claims the exemptions to which debtor is entitled u (Check one box) 11 U.S.C. \$522(b)(2) 11 U.S.C. \$522(b)(3)		neck if debtor claims a homestead exe 55,675. (Amount subject to adjustment on 4/1. with respect to cases commenced on	/16, and every three years thereas				
Description of Property	Specify Law Providin Each Exemption	yalue of Claimed Exemption	Current Value of Property Without Deducting Exemption				
Real Property House and 1 1/2 Lots Location: 111 Wison St., Wheaton MO 64874	RSMo § 513.475	15,000.00	31,000.00				
<u>Cash on Hand</u> Cash on Hand	RSMo § 513.430.1(3)	50.00	50.00				
Household Goods and Furnishings Sectional Couch, Loveseat, Piano, Entertainment Center, Armoire, Children's Toys, 3 Televisions, 2 DVD Players, Dining Room Table and 5 Chairs, Pots and Pans, Dishware, Coffee Pot, Mixer, Toaster, Stove, Microwave, Refrigerator, Washer, Dryer, Bedroom Set, Tools, Toolbox, Miscellaneous Scrap Material, BBQ Grill, Weedeater, Push Spreader, Lawn Mower, Chainsaw, Tablesaw	RSMo § 513.430.1(1)	2,900.00	2,900.00				
Books, Pictures and Other Art Objects; Collectibles Books, DVD's, Knife Collection	<u>s</u> RSMo § 513.430.1(1)	300.00	300.00				
Wearing Apparel Clothing	RSMo § 513.430.1(1)	300.00	300.00				
Furs and Jewelry Wedding Ring	RSMo § 513.430.1(2)	100.00	100.00				
Miscellaneous Costume Jewelry	RSMo § 513.430.1(2)	50.00	50.00				
<u>Firearms and Sports, Photographic and Other Hob</u> Fishing Poles, Pilates Machine	<u>by Equipment</u> RSMo § 513.430.1(1)	100.00	100.00				
Interests in IRA, ERISA, Keogh, or Other Pension o 401(k) Wells Fargo	r Profit Sharing Plans RSMo § 513.430.1(10)(f)	8,753.48	8,753.48				
ESOP Schrieber Foods, Inc.	RSMo § 513.430.1(10)(f)	17,665.00	17,665.00				
Automobiles, Trucks, Trailers, and Other Vehicles 2006 Pontiac G6 VIN #1G2ZF55B164211176	RSMo § 513.430.1(5)	3,000.00	2,000.00				

Total: 48,218.48 63,218.48

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B6D (Official Form 6D) (12/07)

In re	Jacob Marcus Hardwick,	Case No.
	Regina Marie Hardwick	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 870689418 Bank of America Home Loans P.O. Box 5170 Simi Valley, CA 93062-5170	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN 1/2008 First Mortgage House and 1 1/2 Lots Location: 111 Wison St., Wheaton MO	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY	
			64874 Value \$ 31,000.00				29,963.00	0.00	
Account No.			Value \$				20,000.00		
Account No.									
0	_	<u> </u>	Value \$	ubte	ota	l l	20,000,00	0.00	
continuation sheets attached			(Total of the	nis p	oag	e)	29,963.00	0.00	
	Total (Report on Summary of Schedules) 29,963.00 0								

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B6E (Official Form 6E) (4/13)

Case No. In re Jacob Marcus Hardwick, Regina Marie Hardwick

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Jacob Marcus Hardwick, Regina Marie Hardwick		Case No.	
		Debtors		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C		COXHLZGEZ	QU		U T F	AMOUNT OF CLAIM
Account No.	İ		2010 Cell Phone Bill	N T	DATED		Ī	
Alltel Communications Building 4, Fifth Floor One Allied Drive Little Rock, AR 72202-2099		J						1,000.00
Account No.	T			T	Г	T	1	
Verizon Wireless Attn: Recovery Department 1515 E. Woodfield Rd. Suite 1400 Schaumburg, IL 60173-5443			Representing: Alltel Communications					Notice Only
Account No.			2011	T		Ť		
Barry-Lawrence Ambulance P.O. Box 384 Monett, MO 65708		J	Medical Debt					166.00
Account No. 57333441	Ͱ	├		\vdash	\vdash	+	+	
Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044			Representing: Barry-Lawrence Ambulance					Notice Only
			(Total of t	Subt)	1,166.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community		U N L	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	l a	SPUTED	AMOUNT OF CLAIM
Account No. 14BR-AC00409			2013	٦т	T		
Berlin-Wheeler, Inc. P.O. Box 463 Jefferson City, MO 65102-0463		J	Medical Debt		D		599.25
Account No.							
Jason W. Bolton, Esq. 300 S. John Q. Hammons Pkwy. Suite 112 Springfield, MO 65806			Representing: Berlin-Wheeler, Inc.				Notice Only
Account No. Multiple Accounts			2011-2013				
Cox Medical Centers 1423 N. Jefferson Ave. Springfield, MO 65802-1917		J	Medical Debt				2,842.00
Account No.				T	T		
Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044			Representing: Cox Medical Centers				Notice Only
Account No. Multiple Accounts		Ī	2009-2013		l		
Cox Monett Hospital 801 N. Lincoln Ave Monett, MO 65708-1641		J	Medical Debt				12,342.00
Sheet no1 of _7 sheets attached to Schedule of				Sub	tota	.1	15,783.25
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	15,763.25

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

						_	
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	ГЬ	DISPUTED	AMOUNT OF CLAIM
Account No.				⊤ [A T E		
Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044			Representing: Cox Monett Hospital		D		Notice Only
Account No.	T		2011	T	T		
Cox Regional Services 3555 S. National Ave. Suite 400 Springfield, MO 65807		J	Medical Debt				
					L		210.00
Account No. 57055418 Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044			Representing: Cox Regional Services				Notice Only
Account No. Multiple Accounts			2012-2014				
CoxHealth 1423 N. Jefferson Ave. Springfield, MO 65802-1917		J	Medical Debt				819.00
Account No.	✝	\vdash		\vdash	\vdash	\vdash	
Berlin-Wheeler, Inc. P.O. Box 463 Jefferson City, MO 65102-0463			Representing: CoxHealth				Notice Only
Sheet no. 2 of 7 sheets attached to Schedule of				Subt			1,029.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nıs	pag	ge)	· · · · · · · · · · · · · · · · · · ·

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

	_	1				_	_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	- ZG WZ	Q U I	DISPUTED	<u> </u>	AMOUNT OF CLAIM
Account No.			2012	Т	E			
DirecTV P.O. Box 9001069 Louisville, KY 40290-1069		J	Satellite Cable Bill		D			225.00
Account No. 10270860000788307	╀	\vdash	2009	\vdash	\vdash	├	+	
Dr. Stephen Stidham, DDS c/o Kansas Counselors of KS P.O. Box 14765 Lenexa, KS 66285		J	Medical Debt					
								122.00
Account No. Multiple Accounts Ferrell-Duncan Clinic, Inc. P.O. Box 9007 Springfield, MO 65808-9007	-	J	2012-2014 Medical Debt					
								720.00
Account No. Berlin-Wheeler, Inc. P.O. Box 463 Jefferson City, MO 65102-0463			Representing: Ferrell-Duncan Clinic, Inc.					Notice Only
Account No. 53851825 Freeman Anesthesia c/o Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044	<u>-</u>	J	2010 Medical Debt					105.00
Sheet no3 of _7 sheets attached to Schedule of				Subt			T	1,172.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	re)	, [.,2.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

		_		_			
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CO	U N	D	
MAILING ADDRESS	ОДШВНО	Н	DATE CLAIM WAS INCURRED AND	Ň	ZJ_GD	S P U T	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	W	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	U	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE. G 1 E 1		AMOUNT OF CLAIM		
· ·	ĸ			NGENH	DATE	ט	
Account No. 13BR-AC00560			2012 Medical Debt				
Francis Hasith Custom			Medical Dept		D		
Freeman Health System		J					
1102 West 32nd St. Springfield, MO 65804		٦					
Springheid, MO 65604							
							1,146.96
Account No.							
Marthaus O Adrian Fan							
Matthew G. Adrian, Esq. P.O. Box 939			Representing:				
			Freeman Health System				Notice Only
Joplin, MO 64802-0939							
Account No. Multiple Accounts			2009-2010				
			Medical Debt				
Independent Imaging, LLC							
P.O. Box 1297		J					
Joplin, MO 64802-1297							
							316.00
Account No. 53101691/52466044							
Transworld Systems, Inc.			Representing:				
507 Prudential Rd.			I -				Notice Only
Horsham, PA 19044			Independent Imaging, LLC				Notice Only
11010111111,177.10011							
Account No.			6/2009	Ħ			
			Medical Debt				
Litton & Giddings Rad. Assoc., P.C.							
P.O. Box 2727		J					
Springfield, MO 65801-2727							
		L					445.00
Sheet no4 of _7 sheets attached to Schedule of				Subt			1,907.96
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	1,307.30

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No.
	Regina Marie Hardwick	

	_						
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CONT	U N L	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	AMOUNT OF CLAIM			
Account No. 50013191				NGENT	D A T E D		
Transworld Systems, Inc. 507 Prudential Rd. Horsham, PA 19044			Representing: Litton & Giddings Rad. Assoc., P.C.		D		Notice Only
Account No.	T		2015	T	Т	Т	
Mark Hardwick Purdy, MO		J	Personal Loan				
							2,000.00
Account No. Multiple Accounts Mercy Clinic 1730 E. Portland Springfield, MO 65804		J	2012-2014 Medical Debt				
							1,189.00
Account No.	1						
Valarity, LLC P.O. Box 505023 Saint Louis, MO 63150-5023			Representing: Mercy Clinic				Notice Only
Account No.	Ī		4/2010	T	T	T	
Mercy Hospital 1730 E. Portland Springfield, MO 65804		J	Medical Debt				324.00
Sheet no5 _ of _7 _ sheets attached to Schedule of				Subt	tota	ıl	2 542 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,513.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
_	Regina Marie Hardwick	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDAT	DISPUTED	:	AMOUNT OF CLAIM
Account No. 1451026 Rickman & Rickman P.O. Box 212269 Columbia, SC 29221			Representing: Mercy Hospital		E D			Notice Only
Account No. 918648132110R0120130411 Navient Solutions, Inc. P.O. Box 9500 Wilkes Barre, PA 18773-9500		J	9/2004-8/2005 Student Loan					1,075.00
Account No. Multiple Accounts Progressive Insurance Co. 6300 Wilson Mills Rd. Cleveland, OH 44143		J	2014 Insurance Bill					169.00
Account No. Credit Collection Services Two Wells Avenue Newton Center, MA 02459			Representing: Progressive Insurance Co.					Notice Only
Account No. 86774 SW Kansas Emergency Physicians, LLP 75 Remittance Drive Suite 1151 Chicago, IL 60675-1151		J	8/2014 Medical Debt				†	200.00
Sheet no. _6 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			,†	1,444.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jacob Marcus Hardwick,	Case No
	Regina Marie Hardwick	

	1 -			.	1	-	- 1	
CREDITOR'S NAME,	C	Hu	Isband, Wife, Joint, or Community	- 6	I U			
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATE	F	S P U T E D	AMOUNT OF CLAIM
Account No.			2014	Т	E			
US Bank 832 US Highway 60 Monett, MO 65708		J	Overdraft Bank Accounts		D			Unknown
Account No. Multiple Accounts			2012-2014	T		T	1	
Western Plains Medical c/o Medicredit, Inc. P.O. Box 1629 Maryland Heights, MO 63043		J	Medical Debt					
								285.00
Account No. 20059916						l		
West Asset Management 2703 N. Highway 75 Sherman, TX 75090			Representing: Western Plains Medical					Notice Only
Account No.	l			+				
Account No.								
Sheet no7 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub			,	285.00
6			(1011)		Γota		Ŀ	
			(Report on Summary of So					26,300.21

B6G (Official Form 6G) (12/07)

In re

Jacob Marcus Hardwick, Regina Marie Hardwick

Case No	

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Aaron's Sales & Lease Monett, MO 65708 Month by Month Rental Agreement for Purchase of Sectional Couch and Loveseat

Verizon Wireless P.O. Box 25505 Lehigh Valley, PA 18002-5505 2 Year Cell Phone Contract

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B6H (Official Form 6H) (12/07)

In re	Jacob Marcus Hardwick,	Case No.
	Regina Marie Hardwick	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to ider	ntify your c	ase:							
Del	btor 1 Jac	ob Marc	us Hardwick							
	btor 2 Reg	gina Mari	e Hardwick							
Uni	ited States Bankruptcy C	ourt for the	: WESTERN DISTRICT	Γ OF MIS	SOURI					
Cas	se number			_		Che	ck if this is:			
(If kr	nown)			-			An amended	filing		
							A supplemen 13 income as		post-petition chapt llowing date:	ter
0	fficial Form B 6	<u> </u>					MM / DD/ YY	ΥY		
S	chedule I: You	ur Ince	ome						12	2/13
Par	Tt 1: Describe Emp									
1.	information.	ent		Debto	1		Debtor 2 c	or non-fili	ing spouse	
	If you have more than		Fundament status	■ Em	ployed		■ Employ	red		
	attach a separate page information about addit		Employment status	☐ Not	employed		☐ Not employed			
	employers.		Occupation	Wrap	per Operator		Meat Dep	oartment	t	
	Include part-time, seas self-employed work.	onal, or	Employer's name	Schre	iber Foods, Inc.		L & S Fo	ods		
	Occupation may includ or homemaker, if it app		Employer's address		iry Street tt, MO 65708		102 W. M Wheaton		874	
			How long employed to	here?	3 1/2 Years		<u>5 N</u>	Months		
Par	rt 2: Give Details	About Mor	othly Income							
	mate monthly income a use unless you are separ		ate you file this form. If	you have	nothing to report for ar	ıy line, wr	ite \$0 in the s	space. Inc	clude your non-filing	i
	ou or your non-filing spous e space, attach a separa			ombine th	e information for all em	ployers fo	or that person	on the lir	nes below. If you ne	ed
						For De	ebtor 1	For Deb	tor 2 or ng spouse	
2.			ry, and commissions (b			\$	3,809.93	\$	1,059.40	

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,809.93 \$ 1,059.40

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 3,809.93 \$ 1,059.40

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	tor 1 tor 2	Regina Marie Hardwick		Case i	number (<i>if known</i>)				
				For	Debtor 1		or Debtor on-filing s		
	Сор	y line 4 here	4.	\$	3,809.93	\$		059.40	-
5	Lict	all payroll doductions:				•			_
5.		all payroll deductions:	Fo	c	E04.0E	¢.		400.04	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ \$	521.65 0.00	\$ \$		129.31 0.00	=
	5c.	Voluntary contributions for retirement plans	5c.	\$	247.80	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	-
	5e.	Insurance	5e.	\$	541.13	\$		0.00	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	=
	5g.	Union dues	5g.	\$	0.00	\$		0.00	=
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$		0.00	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,310.58	\$		129.31	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,499.35	\$		930.09	=
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•					
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ \$	0.00	\$ \$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		Ψ \$	0.00	Ф _.		0.00	_
	8d.	Unemployment compensation	8d.	\$ 	0.00	\$		0.00	=
	8e.	Social Security	8e.	\$	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e - <mark>8f.</mark> 8g.	\$ \$	0.00	\$ \$		0.00	_
	8h.	Other monthly income. Specify:	8h.+	· · —		+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		0.00	- -
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	•	2.499.35 + \$		930.09	= \$	3.429.44
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'-		, , , , , , , , , , , , , , , , , , , ,			. ' -	0,120111
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the contributions of the contribution of	depen		•				0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies						\$	
13	Dos	you expect an increase or decrease within the year after you file this form	?					monthl	y income
٠٠.	5 0 y	No.	•						
	_	Yes. Explain:							

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Fill	in this inform	ation to identify ye	our case:							
Deb	tor 1	Jacob Marcu	ıs Hardw	rick		Ch	eck if thi	s is:		
					_		An am	nended filing		
	tor 2 ouse, if filing)	Regina Mari	e Hardwi	ck					ving post-petition chapter the following date:	
Unit	ed States Bank	ruptcy Court for the:	WESTE	ERN DISTRICT OF MISSO	DURI		MM / I	DD / YYYY		
	e number nown)								r Debtor 2 because Debto rate household	r
Of	fficial Fo	orm B 6J								
So	chedule	J: Your	Exper	nses					12/1	3
Be info	as complete ormation. If n	and accurate as	possible eded, atta	. If two married people a ach another sheet to this	re filing together, bot form. On the top of a	h are e iny add	qually re itional p	esponsible fo pages, write	or supplying correct your name and case	_
Par		ribe Your House	hold							_
1.	Is this a joi									
	□ No. Go t		in a sanai	rate household?						
	_		ın a separ	rate nousenoid?						
	■ N									
	Пλ	es. Debtor 2 mus	st file a sep	parate Schedule J.						
2.	Do you hav	ve dependents?	□ No							
	Do not list Dand Debtor		■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	De ag	ependent's e	Does dependent live with you?	
	Do not state	e the							□ No	
	dependents	' names.			Daugther		3		Yes	
					5 1.		•		□ No	
					Daughter		6		■ Yes	
									□ No	
					-				☐ Yes	
									□ No □ Yes	
3.	Do vour ex	penses include	_	l					⊔ Yes	
	expenses of	of people other to ad your depende	han _	No Yes						
		nate Your Ongoi								_
exp		a date after the		uptcy filing date unless y by is filed. If this is a supp						÷
the		ch assistance an		government assistance cluded it on Schedule I:				Your expe	enses	
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4.	\$		285.00	
	If not inclu	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's	s, or renter	r's insurance		4b.			0.00	
				upkeep expenses		4c.	:		0.00	
_		eowner's associat				4d.			0.00	
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

Utilities: 6a. Ele 6b. Wa 6c. Tel 6d. Ott Food and Childcar Clothing Dersonal Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	Case num 6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	150.00 60.00 410.00 0.00 900.00 200.00 80.00 20.00 500.00 100.00
6a. Ele 6b. Wa 6c. Tel 6d. Oth Food and Childcar Clothing Dersonal Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	ater, sewer, garbage collection lephone, cell phone, Internet, satellite, and cable services her. Specify: d housekeeping supplies e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. hment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations he. clude insurance deducted from your pay or included in lines 4 or 20. he insurance alth insurance hicle insurance	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	60.00 410.00 0.00 900.00 200.00 80.00 20.00 500.00 100.00 60.00
6a. Ele 6b. Wa 6c. Tel 6d. Oth Food and Childcar Clothing Dersonal Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	ater, sewer, garbage collection lephone, cell phone, Internet, satellite, and cable services her. Specify: d housekeeping supplies e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. hment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations he. clude insurance deducted from your pay or included in lines 4 or 20. he insurance alth insurance hicle insurance	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	60.00 410.00 0.00 900.00 200.00 80.00 20.00 500.00 100.00 60.00
6b. Wa 6c. Tel 6d. Ott Food and Childcar Clothing Personal Medical Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	ater, sewer, garbage collection lephone, cell phone, Internet, satellite, and cable services her. Specify: d housekeeping supplies e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. hment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations he. clude insurance deducted from your pay or included in lines 4 or 20. he insurance alth insurance hicle insurance	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	60.00 410.00 0.00 900.00 200.00 80.00 20.00 500.00 100.00 60.00
6c. Tel 6d. Ott Food and Childcar Clothing Dersonal Medical Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	dephone, cell phone, Internet, satellite, and cable services her. Specify: d housekeeping supplies e and children's education costs , laundry, and dry cleaning d care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Imment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	410.00 0.00 900.00 0.00 200.00 80.00 20.00 500.00 100.00 60.00
6d. Oth Food and Childcar Clothing D. Personal Medical Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	ner. Specify: d housekeeping supplies e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Imment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations e. clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 900.00 0.00 200.00 80.00 20.00 500.00 100.00 60.00
Food and Childcan Clothing Dersonal Medical Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life	d housekeeping supplies e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Imment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. le insurance alth insurance hicle insurance	7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	900.00 0.00 200.00 80.00 20.00 500.00 100.00 60.00
Childcan Clothing Dersonal Medical Transpo Do not in Charitab Insuranc Do not in 15a. Life	e and children's education costs , laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Imment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. le insurance alth insurance hicle insurance	8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 200.00 80.00 20.00 500.00 100.00 60.00
Clothing Personal Medical at Transport Do not in Charitab Insuranc Do not in 15a. Life	, laundry, and dry cleaning I care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Imment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. le insurance alth insurance hicle insurance	9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 80.00 20.00 500.00 100.00 60.00
Do not in: Charitab Insurance Do not in: Charitab Insurance Do not in: 15a. Life	care products and services and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. Inment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. le insurance alth insurance hicle insurance	10. 11. 12. 13. 14.	\$	80.00 20.00 500.00 100.00 60.00
Medical at 22. Transport Do not in B. Entertair I. Charitab 5. Insurance Do not in 15a. Life	and dental expenses rtation. Include gas, maintenance, bus or train fare. clude car payments. ment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations e. clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	11. 12. 13. 14.	\$	20.00 500.00 100.00 60.00
 Transpol Do not in Entertair Charitab Insuranc Do not in 15a. Life 	rtation. Include gas, maintenance, bus or train fare. clude car payments. ment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations e. clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	12. 13. 14.	\$ \$ \$	500.00 100.00 60.00
Do not in Entertair Charitab Insuranc Do not in 15a. Life	clude car payments. Inment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. It clude insurance deducted from your pay or included in lines 4 or 20. It is insurance alth insurance Insurance	13. 14. 15a.	\$ \$ 	100.00 60.00
EntertairCharitabInsurancDo not in15a. Life	nment, clubs, recreation, newspapers, magazines, and books le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. le insurance alth insurance hicle insurance	14. 15a.	\$	60.00
 Charitab Insurance Do not in 15a. Life 	le contributions and religious donations le. clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	15a.	· -	60.00
Do not in 15a. Life	clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance	15a.	· -	
Do not in	clude insurance deducted from your pay or included in lines 4 or 20. e insurance alth insurance hicle insurance		\$	<u>.</u>
15a. Life	e insurance alth insurance hicle insurance		\$	
15b He	hicle insurance	15b.		0.00
100. 110			\$	0.00
15c. Ve		15c.	\$	110.00
15d. Oth	ner insurance. Specify:	15d.	\$	0.00
. Taxes. D	o not include taxes deducted from your pay or included in lines 4 or 20.		-	-
Specify:		16.	\$	0.00
	ent or lease payments:			_
17a. Ca	r payments for Vehicle 1	17a.	\$	0.00
	r payments for Vehicle 2	17b.	\$	0.00
	ner. Specify: Husband Student Loan Payment	17c.	\$	150.00
	ner. Specify: Wife Student Loans	17d.	\$	200.00
	ments of alimony, maintenance, and support that you did not repo		¢.	0.00
deducted	d from your pay on line 5, Schedule I, Your Income (Official Form 6)). 18.		
	yments you make to support others who do not live with you.	40	\$	0.00
Specify:	al property synamose not included in lines 4 or 5 of this form or on	19.	aur Inaama	
	al property expenses not included in lines 4 or 5 of this form or on ortgages on other property	20a.		0.00
	al estate taxes	20a. 20b.	·	0.00
	operty, homeowner's, or renter's insurance	20c.		
		20d. 20d.	•	0.00
	intenance, repair, and upkeep expenses meowner's association or condominium dues	20d. 20e.	\$	0.00
			· -	0.00
	pecify: Household Cleaning Supplies	21.	· -	60.00
Haircut			+\$	50.00
Pet Care	<u>e</u>		+\$	60.00
. Your mo	nthly expenses. Add lines 4 through 21.	22.	\$	3,395.00
	t is your monthly expenses.		· ——	<u> </u>
	e your monthly net income.			
	py line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,429.44
23b. Co	py your monthly expenses from line 22 above.	23b.	-\$	3,395.00
			·	0,000.00
23c. Su	btract your monthly expenses from your monthly income.			04.44
	e result is your monthly net income.	23c.	\$	34.44
For examp modificatio	expect an increase or decrease in your expenses within the year aft le, do you expect to finish paying for your car loan within the year or do you expect in to the terms of your mortgage?			or decrease because of a
■ No.				
■ No. □ Yes.				

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Western District of Missouri

In re	Jacob Marcus Hardwick Regina Marie Hardwick		Case No.		
		Debtor(s)	Chapter	7	
	DECLARATION	CONCEDNING DEPENDI	a aciiebiii	D.C.	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury to	hat I have rea	nd the foregoing summary and schedules, consisting of _	24
	sheets, and that they are true and correct to t	he best of my	knowledge, information, and belief.	
Date	June 4, 2015	Signature	/s/ Jacob Marcus Hardwick	
2 4.00		215.141414	Jacob Marcus Hardwick	
			Debtor	
Date	June 4, 2015	Signature	/s/ Regina Marie Hardwick	
	<u> </u>	O	Regina Marie Hardwick	
			Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Western District of Missouri

In re	Jacob Marcus Hardwick Regina Marie Hardwick		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$21,362.81 2015 YTD: Husband Employment Income
\$46,278.00 2014: Husband Employment Income
\$50,635.00 2013: Husband Employment Income
\$5,297.00 2015 YTD: Wife Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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AMOUNT SOURCE

\$878.00 2013: Sale of Cow

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

PROCEEDING

AND LOCATION

DISPOSITION

Lester E. Cox Medical Centers v. Jacob

Medical Debt

COURT OR AGENCY

AND LOCATION

DISPOSITION

Judgment

Hardwick, et al

Case No. 1431-AC02324

Berlin-Wheeler, Inc. v. Jacob M. Hardwick and Medical Debt Barry County Circuit Court Pending

Regina M. Hardwick

Case No. 14BR-AC00409

Freeman Health System v. Regina M. Hardwick, Medical Debt Barry County Circuit Court Judgment

et al.

Case No. 13BR-AC00560

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION John Rice RELATIONSHIP TO DEBTOR, IF ANY **Husband's Grandfather**

DATE OF GIFT **4/2015**

DESCRIPTION AND VALUE OF GIFT

Gifted Air Conditioning Unit

Worth \$300.00.

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

Consumer Credit Counseling 1515 S. Glenstone Springfield, MO 65804 4/2015

\$65.00

Reynolds, Gold & Grosser, P.C. 1240 E. Independence Suite 200

Springfield, MO 65804

8/2014

\$1,000.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

TRANSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY B7 (Official Form 7) (04/13)

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER Mark Hardwick Purdy, MO

DESCRIPTION AND VALUE OF PROPERTY **Debtors are borrowing a vehicle from**

Debtors' Residence

LOCATION OF PROPERTY

husband's father

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE ENVIRONMENTAL

TICE LAW

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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS

ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

ADDRESS NAME

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None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS

OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 4, 2015	Signature	/s/ Jacob Marcus Hardwick	
		_	Jacob Marcus Hardwick	
			Debtor	
Date	June 4, 2015	Signature	/s/ Regina Marie Hardwick	
		_	Regina Marie Hardwick	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Western District of Missouri

In re	Jacob Marcus Hardwick Regina Marie Hardwick				
		I	Debtor(s)	Chapter	7
	CHAPTER 7 IN	DIVIDUAL DEBTO	OR'S STATEMENT	OF INTEN	VTION
PART	A - Debts secured by property of property of the estate. Attach a			ted for EAC .	H debt which is secured by
Propert	ty No. 1				
0 = 0 01=0	or's Name: of America Home Loans		Describe Property S House and 1 1/2 Lot Location: 111 Wison	ts	
Propert	ty will be (check one):				
	Surrendered	■ Retained			
■	ning the property, I intend to (check Redeem the property Reaffirm the debt Other. Explain		oid lien using 11 U.S.C	c. § 522(f)).	
Propert	ty is (check one):				
_	Claimed as Exempt		☐ Not claimed as exe	empt	
Attach a	B - Personal property subject to une additional pages if necessary.) ty No. 1	xpired leases. (All three	columns of Part B mu	ast be complete	ed for each unexpired lease.
	's Name: s Sales & Lease	Describe Leased Pro Month by Month Re Purchase of Section Loveseat	ntal Agreement for	Lease will be U.S.C. § 365 ■ YES	e Assumed pursuant to 11 5(p)(2): □ NO
Propert	ty No. 2				
	's Name: n Wireless	Describe Leased Pro 2 Year Cell Phone C	operty: ontract	Lease will be U.S.C. § 365 ■ YES	e Assumed pursuant to 11 $5(p)(2)$:

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	June 4, 2015	Signature	/s/ Jacob Marcus Hardwick	
			Jacob Marcus Hardwick	
			Debtor	
Date	June 4, 2015	Signature	/s/ Regina Marie Hardwick	
		C	Regina Marie Hardwick	
			Joint Debtor	

6/04/15 9:09AM

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MISSOURI

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Western District of Missouri

	'	Vestern District of Missouri		
In re	Jacob Marcus Hardwick Regina Marie Hardwick		Case No.	
		Debtor(s)	Chapter 7	
		OF NOTICE TO CONSUM 2(b) OF THE BANKRUPT	`	5)
		Certification of Debtor		
	I (We), the debtor(s), affirm that I (we) have	e received and read the attached no	otice, as required by	§ 342(b) of the Bankruptcy
Code.				
	Marcus Hardwick a Marie Hardwick	X /s/ Jacob Mar	cus Hardwick	June 4, 2015
	d Name(s) of Debtor(s)	Signature of D	ebtor	Date
Case No. (if known)		X /s/ Regina Ma	rie Hardwick	June 4, 2015
		Signature of Jo	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Fill in this information to identify your case:						
Debtor 1 Jacob Marcus Hardwick						
Debtor 2 Regina Marie Hardwick (Spouse, if filing)						
United States B	ankruptcy Court for the:	Western District of Missouri				
Case number(if known)						

Check one box only as directed in this form and in Form 22A-1Supp:
■ 1. There is no presumption of abuse
2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i> <i>Calculation</i> (Official Form 22A-2).
☐ 3. The Means Test does not apply now because of

qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A - 1

Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

Part	t 1:	Calculate Your Current Monthly Income								
1.	What	t is your marital and filing status? Check one onl	y.							
	□No	ot married. Fill out Column A, lines 2-11.								
	■ M	arried and your spouse is filing with you. Fill out	both	Columns	s A and B, line	s 2-11.				
	□м	arried and your spouse is NOT filing with you. Y	ou an	nd your	spouse are:					
		Living in the same household and are not legal	ly sep	arated.	Fill out both C	olumns	A and B, lines	2-11.		
		Living separately or are legally separated. fill oupenalty of perjury that you and your spouse are leliving apart for reasons that do not include evading	gally s	eparate	d under nonba	nkruptc	/ law that appli	es or tha		
c: of in	ase. 1 ² f your i icome	he average monthly income that you received fr 1 U.S.C. § 101(10A). For example, if you are filing of monthly income varied during the 6 months, add th amount more than once. For example, if both spou ave nothing to report for any line, write \$0 in the spa	on Sep e incor ses ov	otember me for a	15, the 6-mon	th period d divide	d would be Ma the total by 6.	rch 1 thr Fill in th	ough August 3 e result. Do no	1. If the amount tinclude any
						Colum Debto			on B or 2 or iling spouse	
2.		gross wages, salary, tips, bonuses, overtime, a ayroll deductions).	nd co	mmissi	ons (before	\$	3,809.93	\$	882.84	
3.		ony and maintenance payments. Do not include ${\mathfrak p}$ mn B is filled in.	ayme	nts from	a spouse if	\$	0.00	\$	0.00	
4.	of yo from and r	mounts from any source which are regularly paint or your dependents, including child support. an unmarried partner, members of your household, commates. Include regular contributions from a spoin. Do not include payments you listed on line 3.	Includ your o	e regula depende	r contributions ents, parents,	\$	0.00	\$	0.00	
5.	Net i	ncome from operating a business, profession, o	r farn							
	Gross	s receipts (before all deductions)	\$	0.00						
	Ordin	nary and necessary operating expenses	-\$	0.00						
	Net n	nonthly income from a business, profession, or farm	n\$	0.00	Copy here ->	•\$	0.00	\$	0.00	
6.	Net i	ncome from rental and other real property								
	Gross	s receipts (before all deductions)	\$	0.00						
	Ordin	nary and necessary operating expenses	-\$	0.00						
	Net n	nonthly income from rental or other real property	\$	0.00	Copy here ->	•\$	0.00	\$	0.00	
7.	Intere	est, dividends, and royalties				\$	0.00	\$	0.00	

Official Form 22A-1

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Debtor 1	Jacob Marcus Hardwick
Debtor 2	Regina Marie Hardwick

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unem	ployment compensation			\$	0.00	\$	0.00	
	under	t enter the amount if you contend that the amour the Social Security Act. Instead, list it here:							
		you\$		0.00					
0		your spouse \$		0.00					
9.		on or retirement income. Do not include any ar t under the Social Security Act.	nount received that	was a	\$	0.00	\$	0.00	
10.	Do not receive domes	ne from all other sources not listed above. Sp t include any benefits received under the Social ed as a victim of a war crime, a crime against hu stic terrorism. If necessary, list other sources on n line 10c.	Security Act or paym manity, or internatio	ents nal or					
	10a	l			\$	0.00	\$	0.00	
	10b). 			\$	0.00	\$	0.00	
	10c	c. Total amounts from separate pages, if any.		+	- \$	0.00	\$	0.00	
11.		late your total current monthly income. Add li column. Then add the total for Column A to the to		\$	3,809.93	+ \$ _	882.84		692.77
								Total curr income	ent monthly
Part	2:	Determine Whether the Means Test Applies	to You						
12.	Calcul	late your current monthly income for the year	Follow these steps						
		Copy your total current monthly income from line	•		Con	v line 11 l	n ere=> 12a	s 4	692.77
		rop, your total our our morning moonle nor mic	• • • • • • • • • • • • • • • • • • • •			,		··· •	032.77
	M	Multiply by 12 (the number of months in a year)						x 12	
	12b. T	he result is your annual income for this part of th	ne form				12b	s. \$ 56	313.24
		,							
13.	Calcul	late the median family income that applies to	you. Follow these s	teps:					
	Fill in t	the state in which you live.	MO						
	F:11 : 4		4	1					
		the number of people in your household.	<u>-</u>	J				70	744.00
	Fill in t	the median family income for your state and size	of household.				13.	\$	711.00
14	How d	do the lines compare?							
	14a.	Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1,	check bo	ox 1, <i>There is</i>	no presur	mption of abu	se.	
	14b.	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 22A-2.	of page 1, check box	(2, The p	oresumption o	of abuse is	determined l	by Form 22A	ı - 2.
Part	3:	Sign Below							
	В	By signing here, I declare under penalty of perjury	that the information	on this s	statement and	in any att	achments is	true and cor	rect.
	v	/s/ Jacob Marcus Hardwick	v	lel Bor	nina Maria I	Jardwick	,		
	^	Jacob Marcus Hardwick	^		gina Marie I a Marie Har		<u> </u>		
		Signature of Debtor 1			re of Debtor 2				
	Date	June 4, 2015 MM / DD / YYYY	Date		4, 2015 D / YYYY				
	If	you checked line 14a, do NOT fill out or file For	m 22A-2.	IVIIVI / D	וווו/ ט				
		you checked line 14b, fill out Form 22A-2 and fi							
	***	, sa silsonoa iiilo i ib, iiii out i oiiii ZZit Z alia ii							